

Southwest Independent School District

11914 Dragon Lane, San Antonio, TX 78252

TRANSCRIPT ORDER FORM

(Previous Students and Graduates)

In accordance with the Texas Open Records Act and the Family Educational Rights and Privacy Act of 1974, as amended, student academic records are classified as confidential, and may be released only with the written authorization of the student and/or the legal guardian.

To order your transcript: Fill out, sign, and date the printed form. **Mail** or **Fax** the completed form with a **COPY** of your driver's license or other valid signed picture identification.

Southwest Independent School District Attention: Peggy Estrada - Transcript Request 11914 Dragon Lane, Bldg 302, San Antonio, TX 78252 Fax: (210) 622-4331

Email: pestrada@swisd.net

Requests will be processed within 3 to 5 work days after receipt of request.

NAME UNDER WHIC	CH YOU WERE ENROLL	ED IMPO	RTANT DATES			
First		Date of	Birth			
Middle		Year of	Year of Graduation			
Last		_ If Not a	If Not a Graduate, Years of Attendance Last four digits of Social Security Number ***- **			
CURRENT NAME (if diff	ferent)	Last fou				
PURPOSE OF TRANSCR	RIPTEmploymentN	MilitarySch	olarshipCollege/U	University Other		
SCHOOL ATTENDED _	Southwest High School	Southwest	Academy			
YOUR CURRENT INFO	RMATION					
Address		City	State	Zip		
Telephone	Email					
CHECK						
Please hold them un	til I bring my picture ID to pi	ck them up at Bu	ilding 302.			
Please send	(#) copies of my transcript to	the address listed	above.			
Please send	(#) copies of my transcript to	the following this	rd party:			
Name						
Address						
City	State	Zip				
I certify that I am the pers records to the addresses list		ne name lines of the	nis form and do hereby	authorize release of my academi		
Signature		Today's Date				
[Office Use Only Date	Received Date P	Processed	Date Mailed/Picl	ked up Initial		